

# **City of Tempe** **Spring 2020 K - 3rd Small Ball Hoops**

**\*Non-Tempe Residents Are Welcome / Photos taken for City of Tempe Use\***

## Grades Based on Fall 2019:

\*The first two weeks is small ball camp. During camp players are introduced to the fundamentals of offense, man to man and zone defense. Remaining weeks include practices followed by four 8-minute quarter games.

### Programs Times:

Coed K/1<sup>st</sup>: 9:00am – 10:15am  
 Boys 2<sup>nd</sup>/3<sup>rd</sup>: 10:30am – 11:45am  
 Girls 2<sup>nd</sup>/3<sup>rd</sup>: 12:00pm– 1:15pm

### Locations:

Escalante Community Center  
 2150 E Orange St.

### Program Codes:

Coed K/1<sup>st</sup>: 65967  
 Boys 2<sup>nd</sup>/3<sup>rd</sup>: 65968  
 Girls 2<sup>nd</sup>/3<sup>rd</sup>: 65969

### Program Dates:

April 4<sup>th</sup> – May 16<sup>th</sup> (Saturdays Only)

**Fee: \$89.00 Per Child** \*\*Scholarships available\*\*

\*\*Must verify enrollment in state subsidy program  
 & be a Tempe resident or child attends a Tempe School

**Early Bird Registration February 17th-23rd**  
**Fees: \$75.00**

**Registration opens February 17<sup>th</sup>**

(Recreation Services 3500 S. Rural Rd. 2<sup>nd</sup> Floor)

Monday-Friday, 8:00am – 5:00pm

Fax: 480-350-5058 (Debit or Credit Payment Only)

On-Line: [www.tempe.gov/youthsports](http://www.tempe.gov/youthsports)

[keyon\\_cornejo@tempe.gov](mailto:keyon_cornejo@tempe.gov)

## Small Ball Hoops Registration Form

**Spring 2020**

Participant Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Address: \_\_\_\_\_ APT # \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent's Name \_\_\_\_\_ School: \_\_\_\_\_ Grade (Fall 2019): \_\_\_\_\_

Parent Phone \_\_\_\_\_ Coach/Friend Request: \_\_\_\_\_ Previous Participant: Y N

Secondary Parent's Name: \_\_\_\_\_ Secondary Parent's Phone \_\_\_\_\_

Parent(s) Email: \_\_\_\_\_

Please Circle One):    Coed. K/1<sup>st</sup>: 65967    Boys 2<sup>nd</sup>/3<sup>rd</sup>: 65968    Girls 2<sup>nd</sup>/3<sup>rd</sup>: 65969

### Waiver of Liability

With knowledge and appreciation of the risk of injury, I wish to participate in this Activity. I agree to assume the risk of personal injury while participating. I understand the City of Tempe does not carry accident, sickness, or medical insurance for participants. I understand that all reasonable efforts will be extended to insure my health and safety. If the Class/Activity includes any physical exertion, I agree to perform the exercise at my own ability level. I fully understand the nature of this Class/Activity, and I waive and release and hold harmless the City of Tempe and any of its agents, employees, officers, council members, and sponsors for any and all rights and claims for damages or costs I may have against the City of Tempe, its agents, employees, officers, council members, and sponsors for personal injury, death, or property damage suffered by me, or that I may cause to others, as a result of my participation in this Class/Activity. I agree to look to my private physician for medical advice and care and to notify my teacher or instructor of any physical limitations I might have or modifications I might need to the Class/Activity. I will require the following accommodation to participate: \_\_\_\_\_ I have read and clearly understand the above statements. I realize this is a contract between myself and the City of Tempe and is a release of Liability. I sign it of my own free will. \*Photos may be taken during programs for City of Tempe Use\*

**REQUIRED: Parent or Legal Guardian Signature AND Printed Name** \_\_\_\_\_

Date \_\_\_\_\_

Fee: \$ \_\_\_\_\_ Credit Card Number \_\_\_\_\_ -- -- -- Exp. Date: \_\_\_\_\_

Enclosed Check # \_\_\_\_\_ **OR** Signature Authorizing Charge to above number \_\_\_\_\_